E	in this information to id	ontify your of	00:				1						
	in this information to identify your case: otor 1 Yaritza Hernandez												
	otor 2												
Unit	ed States Bankruptcy	Court for the:	EASTERN DISTRICT	OF PENNSYLVANIA									
Of SC Be a suppression	ficial Form 1 chedule I: You s complete and accu- blying correct inform- use. If you are separa ch a separate sheet to	O6I Our Inco rate as poss ation. If you a ted and you o this form. O	DME ible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your spith you, do not include	oouse i e infori	is liv mati	An As 13 MM	or 2), bot ou, inclu	nnt showing as of the fol YYY The are equal de informuse. If more	ation about your re space is needed			
1.	Fill in your employment			Dobtor 1				Debter 2 or non filling agreement					
	information.	o ono iob		Debtor 1 ■ Employed				Debtor 2 or non-filing spouse ☐ Employed					
	If you have more than attach a separate page information about add	ge with	Employment status	☐ Not employed				☐ Not employed					
	employers.		Occupation	Clerical									
	Include part-time, sea self-employed work.	asonal, or	Employer's name	Capstone Logistics									
	Occupation may inclu or homemaker, if it ap		Employer's address	30 Technology parkway Norcross, GA 30092									
			How long employed to	here? <u>1 year</u>				_					
Par	t 2: Give Details	s About Mon	thly Income										
	mate monthly income use unless you are sep		te you file this form. If	you have nothing to rep	ort for	any	line, write S	\$0 in the	space. Incl	ude your non-filing			
If you		use have mo	re than one employer, co	ombine the information	for all e	empl	oyers for th	nat perso	n on the lin	es below. If you nee			
							For Debt	or 1	For Debtor 2 or non-filing spouse				
2.			y, and commissions (be alculate what the monthle		2.	\$	2,9	13.69	\$	N/A			
3.	Estimate and list me	onthly overti	me pay.		3.	+\$		0.00	+\$	N/A			

2,913.69

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Yaritza Hernandez	-	(Case	number (if kn	own)	17-13	3081		
					For	Debtor 1			Debtor -filing s		
	Cop	by line 4 here	4.		\$_	2,913	.69	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	510	.47	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$.00	\$		N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c) .	\$	0	.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	d.	\$_	0	.00	\$		N/A	
	5e.	Insurance	5e		\$_		.00	\$		N/A	
	5f.	Domestic support obligations	5f.		\$_		.98	\$_		N/A	_
	5g. 5h.	Union dues	5g		\$_ \$.00	+ \$		N/A	
_		Other deductions. Specify:		1.+	Ф _			· · ·		N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	515		\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ _	2,398	.24	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	90		\$	0	00	¢		N 1/4	
	8b.	Interest and dividends	8a 8b		\$ -		.00	\$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	OD	<i>,</i> .	· —			·		-	_
		settlement, and property settlement.	8c		\$_	425		\$		N/A	_
	8d.	Unemployment compensation	8d		\$_		.00	\$		N/A	_
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e) .	\$_	U	.00	\$		N/A	<u>\</u>
	01.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0	.00	\$		N/A	.
	8g.	Pension or retirement income	8g		\$_	0	.00	\$		N/A	<u> </u>
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0	.00	+ \$		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	S	425	.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,823.24	+ \$		N/A	= \$	2,823.24
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		2,023.24	` °		IVA		2,023.24
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe			•				<i>J.</i> +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	2,823.24
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						·	Combi month	ined ly income
	_	Vac Evolain:									

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